



National  
Aeronautics and  
Space  
Administration

# Request, Authorization, Agreement and Certification of Training

NOTE:—See page 2 for Privacy Act Notice.

OFFICE USE ONLY

## SECTION I—INITIATING OFFICE

1. NAME OF APPLICANT ( <i>Last, First, M.I.</i> )		2. OFFICE CODE OF APPLICANT	3. TEL. EXT.		
4. JOB TITLE	5. EMAIL ADDRESS	6. FAX NUMBER	7. GRADE/STEP		
8. POSITION LEVEL <input type="checkbox"/> A. NON-SUPERVISOR <input type="checkbox"/> C. MANAGER <input type="checkbox"/> B. SUPERVISOR <input type="checkbox"/> D. EXECUTIVE		9. NAME OF ORGANIZATION CONDUCTING TRAINING			
11. PURPOSE OF TRAINING ( <i>Enter one item only in code block</i> ) <table border="1"><tr><td>CODE</td></tr><tr><td><div>1. MISSION OR PROGRAM CHANGE      4. IMPROVE PRESENT PERFORMANCE 2. NEW TECHNOLOGY      5. FUTURE PLANS AND GOALS 3. NEW WORK ASSIGNMENT</div></td></tr></table>		CODE	<div>1. MISSION OR PROGRAM CHANGE      4. IMPROVE PRESENT PERFORMANCE 2. NEW TECHNOLOGY      5. FUTURE PLANS AND GOALS 3. NEW WORK ASSIGNMENT</div>	10. LOCATION OF TRAINING ( <i>City &amp; State</i> )	
CODE					
<div>1. MISSION OR PROGRAM CHANGE      4. IMPROVE PRESENT PERFORMANCE 2. NEW TECHNOLOGY      5. FUTURE PLANS AND GOALS 3. NEW WORK ASSIGNMENT</div>					
13. EMPLOYMENT DATES A. NASA ( <i>Month &amp; Year</i> )      B. FEDERAL ( <i>Month &amp; Year</i> )		12. NAME, ADDRESS ( <i>including ZIP Code</i> ), PHONE AND FAX NUMBERS OF ORGANIZATION TO WHICH NASA SHOULD SEND PAYMENT			
14. COURSE TITLE ( <i>Attach a copy of the course description and the cost information</i> )		15. CATALOG/COURSE NO.	<input type="checkbox"/> UNDER GRAD <input type="checkbox"/> GRAD		
16. SPECIAL PROGRAMS ( <i>Please indicate if course is part of any of the following</i> ) <input type="checkbox"/> A. CEP <input type="checkbox"/> B. GSP <input type="checkbox"/> C. OTHER <input type="checkbox"/> D. NONE					
17. SCHEDULED DATES ( <i>Mo., day, yr.</i> ) A. FROM      B. TO		18. NUMBER OF COURSE HOURS A. DURING DUTY      B. NON-DUTY	19. IF ACADEMIC, NUMBER OF CREDITS		
20. JUSTIFICATION FOR TRAINING ( <i>Explain how training is DIRECTLY or INDIRECTLY related to official duties (present or future) and the benefits to be derived by NASA or the government</i> )					
21. COST OF TRAINING A. TUITION OR COURSE FEE      B. TRAVEL      C. PER DIEM      D. OTHER ( <i>Specify</i> )					

## SECTION II—RECOMMENDED APPROVALS AND SIGNATURES

NOTICE. - If training is over 80 hours, signature at right (item 21) constitutes an agreement to Continue in Service, per conditions on reverse. ►		22. SIGNATURE OF APPLICANT	23. DATE
24. NAME AND TITLE OF IMMEDIATE SUPERVISOR		25. SIGNATURE	26. DATE
27. NAME AND TITLE OF NEXT HIGHER LEVEL SUPERVISOR		28. SIGNATURE	29. DATE
30. NAME OF CODE TRAINING CONTACT	31. FAX #	32. SIGNATURE	33. DATE

## SECTION III—HEADQUARTERS TRAINING/PROCUREMENT OFFICE

34. TRAINING APPROVED <input type="checkbox"/> A. YES <input type="checkbox"/> B. NO		35. AMOUNT	36. SIGNATURE OF TRAINING OFFICIAL	37. DATE
38. SAP ENTRY A. INITIALS      B. DATE		39. SENT TO ACCOUNTING A. INITIALS      B. DATE		40. SIGNATURE OF CONTRACTING OFFICER
42. APPROPRIATION OR FUND CHARGEABLE FUND _____ FUND CENTER _____ COST CENTER _____ ORDER _____ WBS _____ PPC _____		43. DOCUMENT/ PURCHASE ORDER NO. ►	41. DATE	
44. VENDOR ID	45. CAGE CODE	46. CREDIT CARD PAYMENT	# PC _____ INITIALS _____ DATE _____	48. BILLING INSTRUCTIONS ( <i>Furnish invoice to:</i> ) <b>Cost and Commercial Accounts Department NASA Goddard Space Flight Center, Code 155, Bldg. 17 Greenbelt Road, Greenbelt, MD 20771</b>
47. AUTHORIZED REIMBURSEMENT AMOUNT UP TO:				

## INSTRUCTIONS FOR COMPLETING NHQ FORM 56

Submit this form at least 10 days prior to the registration date or nomination deadline. Prepare a separate NHQ Form 56 for each course requested. Complete sections I and II (by typing), then fax the completed form to the HQ Training Office, GSFC, on 301-286-0845. For the most part the form is self-explanatory. Items needing further clarification are explained below.

### SECTION I--INITIATING OFFICE

7. **GRADE AND STEP**--Include both grade and step.
8. **POSITION LEVEL**--Levels are defined as follows:
  - A. **Non-Supervisor**--Present non-supervisory employee;
  - B. **Supervisor**--First-line of supervision below whom are only non-supervisory personnel;
  - C. **Manager**--Officials at all levels between the executive level and first-line supervisor. Characteristic of this group are supervisors of subordinate supervisors, managers of project groups, or functional managers;
  - D. **Executive**--In Headquarters this would include heads of program and staff officers reporting to the office of the Administrator, as well as their deputies.
12. **NAME AND ADDRESS (Including ZIP Code, Phone and Fax numbers) OF ORGANIZATION TO WHICH NASA SHOULD SEND PAYMENTS**--The name, street address, city, state, ZIP code, and phone and fax numbers are necessary for prompt payment to the training institution. If NASA conducts the course, print NASA and the installation. If a contractor is conducting the course, print the name of the company and the NASA installation.

Upon approval and authorization of funds, a copy will be returned to the individual for his or her own records. This copy may be used to register for academic courses.
14. **COURSE TITLE, DESCRIPTION AND COST INFORMATION**--In ALL cases where training requested is a college course, the catalog number must be shown. For other training (i.e., USDA, etc.) include the course number when it is given in addition to the brief description. Submit a copy of course description and cost information with the training form.
18. **NUMBER OF COURSE HOURS**--Courses, seminars and conferences for one day are considered to be 8 hours of full-time training during duty hours. Normal three-hour credit courses at post-secondary school institutions are considered to be equivalent to 45 hours for a normal 15-week course.

### SECTION II--RECOMMENDED APPROVALS AND SIGNATURES

- 25 & 28. **SIGNATURE**--For all training, other than long-term (*full-time*) and special programs (i.e., *Harvard Management Programs, Brookings Conferences for Federal Managers, etc.*) requiring senior management endorsements, signatures of immediate and next-level supervisors will suffice. If your immediate supervisor is a division chief, only his/her signature is required.
- 30 - 32. **CODE TRAINING CONTACT**--All codes have a Training Contact whose signature is required before this request will be processed.

*NOTE--Internal policy of some Headquarters divisions requires the approval of the division chief on all training requests. Nothing stated or implied here is intended to conflict with such division policies.*

## EMPLOYEE'S AGREEMENT TO CONTINUE IN SERVICE

**NOTE:** If the training does not exceed 80 hours or involves no cost to the Government, other than salary, an agreement to continue in service is not required. However, approval must be obtained and the request, NHQ Form 56, must be signed in item 22.

1. I AGREE that after I have completed training as described on the face of this form, which is to be furnished me at Government expense, I will continue serving in the National Aeronautics and Space Administration for a period of not less than three times the length of the training, unless I am involuntarily separated. (The length of part-time training is the number of hours spent in class or with the instructor. The length of full-time training is the number of hours in a pay status (OR ON LEAVE) up to a maximum of eight hours a day to forty hours a week, or a maximum of normal tour of duty hours.)
2. If I voluntarily leave the NASA before completing this period of service and do not enter the service of another federal agency, I AGREE to reimburse the NASA for the tuition and related fees, travel and other special expenses (EXCLUDING SALARY) paid in connection with my training.
3. I FURTHER AGREE that, if I voluntarily leave the NASA to enter the service of another federal agency before completing the period of service, I will give the Headquarters Training Office written notice of at least ten workdays, during which time a determination concerning possible reimbursement will be made.
4. I UNDERSTAND that any amounts which may be due the NASA as a result of any failure on my part to meet the terms of this agreement may, unless recovery is waived by the NASA, be withheld from any monies owed me by the Government, or may be recovered by such other methods as are approved by the law.
5. I FURTHER AGREE to obtain approval from the Headquarters Training Office of any change in my approved training program, involving course and schedule changes, withdrawals or incompletions, and/or increased costs. I will notify the Headquarters Training Office of my grade for any academic course. If my grade is less than a "C" I may be required to reimburse NASA for the tuition and related costs.

## PRIVACY ACT NOTICE

**General**--This information is provided pursuant to Public Law 93-579 (Privacy Act of 1974), December 31, 1974, for individuals completing Federal nomination for training forms.

**Authority**--The Government Employees Training Act of 1953 (U.S. Code, Title 5, Sections 4101 to 4118).

**Purposes and Uses**--The information on this form is used in the administration of the Federal Training Program. The purpose of this form is to document the nomination of trainees and completion of training; and it serves as the principal repository of personal, fiscal and administrative information about trainees and the programs in which they participate. The form becomes a part of the permanent employment record of participants in training programs and is included in the Government's Central Personnel Data File.

**Effect of Nondisclosure**--Personal information provided on this form is given on a voluntary basis, as is participation in any training program. Failure to provide this information, however, may result in ineligibility for participation in training programs.